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| C   | COND S           | ·IIDDI  | EMENTAL            | Application Number     | 10/790,766           |  |
| -   | <del>-</del>     |         | LEMENTAL           | Filing Date            | March 3, 2004        |  |
|     |                  |         | DISCLOSURE         | First Named Inventor   | Michelle M. HANNA    |  |
| S   | <b>TATEME!</b>   | NT BY   | ' APPLICANT        | Art Unit               | 1637                 |  |
|     | (Use as          | many sh | eets as necessary) | Examiner Name          | Kim, Young J.        |  |
| She | et 1             | of      | 1                  | Attorney Docket Number | 2072.0010008/MAC/DJN |  |

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| Examiner  | Cite | Document Number                          | Publication Date | Name of Patentee or         | Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear |  |
| Initials* | No.1 | Number-Kind Code <sup>2</sup> (If Known) | MM-DD-YYYY       | Applicant of Cited Document |   |  |
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| Examiner<br>Initials* | Cite<br>No.1 | Foreign Patent Document  Country Code <sup>3</sup> Number <sup>4</sup> Kind Code <sup>5</sup> (if known) | Publication Date<br>MM-DD-YYYY | Name of Patentee or<br>Applicant of Cited Document | Pages, Columns,<br>Lines, Where<br>Relevant Passages or |                |
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|--|----------|----|--------|------------------------|----------------------|--|
| SECOND S   | HDDI     |    | ENITAL | Application Number     | 10/790,766           |  |
| · ·  |          |    |        | Filing Date            | March 3, 2004        |  |
| INFORMAT   |          |    |        | First Named Inventor   | Michelle M. HANNA    |  |
| STATEMENT BY APPLICANT (Use as many sheets as necessary) |          |    |        | Art Unit               | 1637                 |  |
|  |          |    |        | Examiner Name          | Kim, Young J.        |  |
| Sheet  | 1        | of | 1      | Attorney Docket Number | 2072.0010008/MAC/DJN |  |

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|                       | NPL8  |  |          |  |  |  |  |
|                       | NPL9  |  |          |  |  |  |  |

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